Roll-Out Strategy

Since the formation of the Michigan 2-1-1 Collaborative in 1999, we have made steady progress in building needed relationships and developing our strategic and operational plans. Now, we are prepared to move forward aggressively to bring 2-1-1 to life statewide by October 2007.

Our strategy will be executed in six phases. The first three phases have already been completed, making 2-1-1 available to 56% of the state's population by December 2005.

Full execution of Phase 4 and beyond, beginning January 1, 2006, is contingent on the availability of resources and on commitment by state government for sustained operational funding for the system. We believe that once funding is committed, we can complete the full build-out of the system within 24 months, achieving coverage of 75% of the state population within 12 months and 100% coverage within 24 months.

Funding Requirements

The estimated operating cost of *Michigan 2-1-1* over its first five years as a fully integrated statewide system is \$44.8 million – or an average of 90 cents per year for each person in Michigan – less than the cost of a single bottle of soda. This is better than the generally accepted rule of thumb for 2-1-1s nationwide of \$1.00 - \$1.50 per person per year.

This reflects the cost efficiencies realized because we are building primarily on the infrastructure of existing information and referral agencies. As a result, start-up costs are limited to immediate needs to enhance the telecommunications and technology capacity of the regional centers and to put in place the systemwide functions to be performed centrally. By year 3, we anticipate making a major investment in a new integrated telephone system. All of these capital costs will total approximately \$2.9 million over four years.

Our goal is to build sustained, predictable funding for the entire *Michigan 2-1-1* system that will grow as the demands on the system grow. That requires a significant long-term commitment from state government to pay at least 50% of the total annual operating support as well as ongoing support from a broad mix of private sources – United Ways, private foundations and business – and local funding obtained by the regional call centers from local government and other sources.

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	Year 1	Year 2	Year 3	Year 4	Year 5	Total
Regional 2-1-1 Centers					The Control of Control	
Southeast	1,874,498	2,182,991	2,532,281	2,645,875	2,774.426	12,010,071
Central	1,026,373	1,179,695	1,315,298	1,406,832	1,454,169	6,382,367
Southwest	690,604	783,902	858,383	885,968	937.089	4,155,946
West	631,420	700,048	779,660	803,914	841.960	3,757,002
West Central	802,809	865,561	915,417	945,542	996,189	4,525,518
Northeast	676,368	772,503	837,579	863,828	916,867	4,067,145
Upper Peninsula	447,349	482,327	506,078	520,741	535,909	2,492,405
Resource Hubs	500,000	500,000	500,000	500,000	500,000	2,500,000
Total, Regional Centers	6,649,421	7,467,027	8,244,697	8,572,700	8.956.609	39,890,454
State Office	454,850	582,465	616,561	627,575	639.012	2,920,463
Telecommunications	250,000	250,000	500,000	500,000	500,000	2,000,000
Total Operating Costs	7,354,271	8,299,492	9,361,258	9,700,275	10,095,621	44,810,917



Nancy Lindman, Director

Michigan 2-1-1

1627 Lake Lansing Road, Suite B, Lansing MI 48912
Telephone: 517-371-4360 x14 • nlindman@uwmich.org

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What is *Michigan* 2-1-1?

2-1-1 is an easy to remember phone number linking callers in need to available health and human service programs. Designated for this purpose by the FCC in 2000, 2-1-1 is now available to almost half of the U.S. population. In Michigan, development of 2-1-1 is being led by a collaborative effort of the Michigan Association of United Ways, the State of Michigan and local 2-1-1s.

Michigan 2-1-1 will be a public-private partnership embodied in an independent 501(c)3 organization governed by a board of directors representing United Ways, local 2-1-1s, state government, business, private philanthropy and the community.

Based on national trends and the state's population, the *Michigan 2-1-1* system is projected to be handling almost 800,000 calls in its third full year of operation and over 3.9 million calls over the first five years of operation.

The Need for 2-1-1

As change affects all of us and as changing economic conditions increase uncertainty and vulnerability, we must seek new ways to connect with one another and with the resources all of us will need at some point in our lives.

- It is a major challenge for people to learn about and connect with services that are available.
- Greater attention is being paid to health crisis communication, homeland security and emergency management at both the state and local levels.
- The growing need of our population for health and human services has come up against the reality of finite public sector resources, increasing the need to connect people with the broadest possible range of community resources.
- Michigan state government is committed to becoming more efficient, while sustaining its commitment to serving the most vulnerable.
- There is increasing demand for culturally sensitive social services and the ability to communicate with non-English speaking callers.

The System

At the heart of the system will be the most comprehensive database of health and human services in the state, including those provided by nonprofit organizations and by government at all levels. Callers will be linked to nationally certified specialists prepared to help them define their need and connect them with the community resources available to help. The database also will be publicly accessible through the Internet.

There will be seven regional centers that will serve as call centers and have regional responsibility for development and maintenance of the resource database. There will be up to ten additional subregional resource hubs, bringing 2-1-1 as close to as many people as possible.

Together, these organizations will have primary responsibility for building and maintaining the database, serving as the public face for 2-1-1, promoting the service regionally, helping communities use the data that the system collects on local needs and building local partnerships to help support the system.

Systemwide functions will be vested in a central office led by a full-time executive director.

The Benefits

As a result of 2-1-1:

- Individuals will have access to the information and tools they require to find and make decisions about the support they need;
- Service providers will have an expanded knowledge of statewide resources to help them better serve their consumers;
- Policy makers and funders will have more complete information about trends in demand for services and emerging needs;
- Emergency management will have help to disseminate critical information and assist people through disasters;
- Businesses will have an additional way to support employees with their personal needs in an efficient and effective way;
- Government will have access to a proven, 24/7/365, multilingual infrastructure to help increase its efficiency and effectiveness;
- Public officials will be assured that their constituents are better able to get connected with the services they need in cost-effective and responsive ways.



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